



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
 www.uspto.gov



Bib Data Sheet

CONFIRMATION NO. 5046

SERIAL NUMBER 10/715,725	FILING DATE 11/18/2003  RULE	CLASS 005	GROUP ART UNIT 3673	ATTORNEY DOCKET NO. 8266-1185
-----------------------------	---------------------------------------	--------------	------------------------	-------------------------------------

## APPLICANTS

Matthew W. Weismiller, Batesville, IN;

## \*\* CONTINUING DATA \*\*\*\*\*

This application is a CON of 09/736,100 12/13/2000 PAT 6,691,350  
 which claims benefit of 60/170,304 12/13/1999

O.K.R.S.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

none R.S.

## IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 01/08/2004

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY IN	SHEETS DRAWING 2	TOTAL CLAIMS 27	INDEPENDENT CLAIMS 4
Verified and Acknowledged	Examiner's Signature: <i>R. J. L. R.C.S.</i> Initials:				

## ADDRESS

25267  
 BOSE MCKINNEY & EVANS LLP  
 135 N PENNSYLVANIA ST  
 SUITE 2700  
 INDIANAPOLIS , IN  
 46204

## TITLE

Accessories for a patient support apparatus

FILING FEE  RECEIVED 1190	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
------------------------------------	---	--

	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Credit _____